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THE SOCIAL  
WELL-BEING

10, PARK ROAD,  
OXFORD

CARMARTHENSHIRE  
COUNTY COUNCIL

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EDUCATION COMMITTEE

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ANNUAL  
REPORT

of the

SCHOOL MEDICAL OFFICER  
for the Year ended 31st December, 1947

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"Mercury," Llanelly.



INSTITUTE OF SOCIAL  
MEDICINE

10. PARKS ROAD.  
OXFORD

CARMARTHENSHIRE  
COUNTY COUNCIL

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EDUCATION COMMITTEE

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ANNUAL  
REPORT

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SCHOOL MEDICAL OFFICER  
for the Year ended 31st December, 1947



# CARMARTHENSHIRE COUNTY COUNCIL

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## Education Committee

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### ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER FOR THE YEAR ENDED 31st DECEMBER, 1947.

Mr. Chairman, My Lady, Ladies and Gentlemen,

I beg to submit for your consideration the Annual Report on the work of the School Health Service for the year ended 31st December, 1947. The delay in the submission of the report is regretted; it has been due to the additional duties and responsibilities falling on the Department as a result of the provisions of the National Health Service Act, 1946.

A most important administrative step was taken in 1947 resulting in the fusion of the staffs of the Public Health and School Medical Departments into one properly co-ordinated Health Department. This was made possible by the welcomed return of Mr. W. C. Thomas, M.B.E., from H.M. Forces. The brunt of the administrative detail of fusion fell to the lot of Mr. Thomas after his appointment as Administrator of the Health Department, and I am happy to record his loyal co-operation and help in bringing about smoothly the radical changes necessary.

The work of the School Medical Service during the year gives cause for little special comment. The nutrition of the school child was again particularly good and only 90 or 1.15 per cent. were found at routine medical inspection to be in a state of poor nutrition. This I feel sure, reflects credit on the system of milk and meals at school.

At the end of the year, Mr. A. O. Parker resigned from his post as Visiting Orthopædic Surgeon, and I must place on record my appreciation of the excellent work he has done for orthopædics in the County. Over 6,000 additional attendances were made at the Orthopædic Clinics as compared with the previous year, and it is necessary to bring to the notice of the Authority that there is over-loading of orthopædic clinics by cases who could well be looked after at remedial classes at Schools, given the co-operation and good will necessary for such work.

The specialist services of the Authority were increased during the year by the appointment of Dr. Rhys Lewis, Swansea, as Dermatologist; Dr. A. G. Watkins, Cardiff, as Pædiatrician; Dr. Iwan Davies, Swansea, as Dental Radiologist; and Mr. R. E. Rix, London, as Consultant Orthodontist. Arrangements were also completed at the end of the year for the establishment of an Asthma Clinic which opened in February, 1948.

Steps were taken by the Authority for the provision of residential facilities for the educationally subnormal child, and while this is most praiseworthy, I feel that there is as strong a case for the provision of residential facilities for the delicate child, and for the rheumatic child in particular. Perhaps consideration can be given to this urgent and important problem in the near future.

I am grateful to the Chairman, Vice-Chairman, and members of the Education Committee and the Director of Education for their help and the kind consideration they have shown to me, and to the Teachers for their continued interest and valuable assistance. I would also record my appreciation of the loyal co-operation of all members of the professional, nursing, administrative and clerical staff.

I have the honour to be,

Your obedient Servant,

R. EVANS,

School Medical Officer.

County Medical Officer of Health.

**STAFF.**

County Medical Officer of Health and School Medical Officer:

R. Evans, M.D., D.P.H.

Deputy County Medical Officer of Health, Deputy School Medical Officer and Divisional School Medical Officer:

D. G. G. Jones, M.B., B.S., D.P.H. (commenced duties 1 Sept., 47).

Assistant Medical Officers:

Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H.

E. H. Beynon Hopkins, M.R.C.S., L.R.C.P.

E. T. Davies Humphreys, M.R.C.S., L.R.C.P.

D. O. Davies, M.R.C.S., L.R.C.P. (commenced duties 29 Sept., 47).

Chief Dental Officer:

G. Ungood Griffiths, L.D.S., R.C.S.

Assistant Dental Officers:

W. U. Auerbach, M.D. (Berlin) (temporary).

F. G. Day (temporary).

Dental Attendants:

Miss M. R. Williams.

Miss Mair Aubrey.

Miss E. V. Lloyd (commenced duties 10 Sept., 47).

Mrs. Alma B. Lewis (resigned 13 Jan., 47).

Mrs. E. M. Valentine (resigned 20 Jun., 47).

Senior Orthopædic Sister:

Miss E. R. Buckley, C.S.M.M.G.

Assistant Orthopædic Sister:

Miss G. E. Roberts, C.S.M.M.G. (commenced duties 13 Jan., 47).

Orthopædic Surgeon (part-time):

A. O. Parker, C.M., Cardiff (resigned 31 Dec., 47).

Ophthalmic Surgeons (part-time):

E. K. Roy Thomas, F.R.C.S., D.O.M.S., Swansea.

J. J. Healy, M.B., Ch.B., Llanelly.

Ear, Nose and Throat Surgeons (part-time):

T. I. Williams, F.R.C.S., Llanelly.

C. P. Robinson, F.R.C.S., Swansea.

J. Crowther, F.R.C.S., Swansea.

Hon. Plastic Surgeon:

T. Pomfret Kilner, F.R.C.S., London.

Pædiatrician (part-time) :

Arthur G. Watkins, M.D., F.R.C.P., Cardiff.

Dermatologist (part-time) :

D. Rhys Lewis, M.D., F.R.C.P., Swansea.

Dental Radiologist (part-time) :

Iwan Davies, L.R.C.P., L.R.C.S., D.M.R.E., Swansea.

Consultant Orthodontist :

R. E. Rix, M.R.C.S., L.D.S., R.C.S., London.

Superintendent Health Visitor and Inspector of Midwives :

Miss Eunice Jones, S.R.N., S.C.M., H.V. Cert.

Senior Health Visitor :

Miss F. Hughes, S.R.N., S.C.M., H.V. Cert. (commenced duties 1 Nov., 47).

Under the temporary arrangements made by the Education Committee, the Medical and Dental Officers of the former autonomous areas of Llanelly and Carmarthen Boroughs continued their duties in those areas, viz. :—

Llanelly Borough :

C. T. Baynes, M.D., D.P.H. (resigned 14 Jun., 47).

M. Neugroeschl, M.D. (Vienna).

T. E. Mathias, L.R.C.P., L.D.S., R.C.S.

Miss E. B. Evans, Dental Attendant (commenced duties 6 Oct., 47).

Carmarthen Borough :

Elfyn T. Jones, B.Sc., M.R.C.S., L.R.C.P., D.P.H.

Gwilym Evans, L.D.S. (part-time Dental Officer).

Mrs. V. M. Arundel, Part-time Dental Attendant (commenced duties 1 Oct., 47).

## NURSING.

District.	Nurse.	Qualifications.
<b>Whole-time Nurses.</b>		
Amman Valley	..... R. A. Roberts	..... S.R.N. and S.C.M.
Ammanford	..... A. Howells	..... S.R.N., S.C.M. and Health Visitors' Certificate.
Trimsaran	..... H. E. James	..... S.R.N. and S.C.M.
Burry Port	..... F. M. Williams	..... S.R.N., S.C.M. and Health Visitors' Certificate.
Llanelly Rural	..... M. Jones	..... S.C.M., Health Visitors' Certificate, and Diploma in School Nursing and Hygiene.
Carmarthen Rural	..... D. Evans	..... S.R.N., S.C.M. and Health Visitors' Certificate.
St. Clears	..... M. E. E. Davies	..... S.R.N., S.C.M., and Health Visitors' Certificate.



District.	Nurse.	Qualifications.
Carmarthen Borough .....	M. P. Phillips .....	S.R.N. and S.C.M.
Llanelly Borough .....	M. Hopkins .....	S.R.N.
	M. C. Jones .....	S.R.N. and S.C.M.
	G. Greene .....	S.R.N., S.C.M. and Health Visitors' Certificate.
	G. M. Roberts .....	S.R.N., S.C.M. and Health Visitors' Certificate.
	S. Thomas .....	S.R.N., S.C.M. and Health Visitors' Certificate.

### Part-time Nurses.

Drefach .....	E. Sprague .....	S.C.M.
Llangendeirne.....	M. E. John .....	S.C.M.
Gorslas .....	A. Anthony Jones .....	S.R.N. and S.C.M.
Tumble .....	H. E. A. Ratford .....	S.R.N., S.C.M. and R.F.N.
Saron .....	G. M. Lewis .....	S.R.N. and S.C.M.
Tycroes .....	M. Williams .....	S.R.N. and S.C.M.
Llangunmor .....	K. E. Critchley .....	S.C.M.
Abergwili .....	M. Evans .....	S.R.N. and S.C.M., R.F.N.
Nantgaredig .....	E. Thomas .....	S.R.N. and S.C.M.
Llangathen .....	E. Evans .....	S.R.N. and S.C.M.
Llanfihangel-Aberbythich .....	M. M. Davies .....	S.R.N. and S.C.M.
Llandilo (Town) .....	D. E. Yendle .....	S.R.N. and S.C.M.
Llandilo (South Ward) .....	E. A. Davies .....	S.R.N. and S.C.M.
Llandilo (North Ward) .....	E. J. Hughes .....	S.C.M.
Llansawel .....	M. L. James .....	S.R.N. and S.C.M. and Health Visitors' Certificate.
Talley .....	J. Evans .....	S.C.M.
Llanfynydd .....	E. A. Jones .....	S.C.M.
Llandovery .....	B. Davies .....	S.R.N. and S.C.M.
Cilycwm .....	E. G. Cox .....	S.C.M.
Caio .....	S. Jenkins.....	S.C.M.
Llangadock .....	C. Jones .....	S.R.N. and S.C.M.
Llansadwrn and Llanwrda .....	M. E. Preece .....	S.C.M.
Newcastle Emlyn .....	V. J. Jones .....	S.R.N. and S.C.M.
Velindre .....	G. R. Luke .....	S.R.N. and S.C.M.
Ferryside .....	M. M. T. Richards- Jones .....	S.C.M.
Llanstephan .....	A. M. Evans .....	S.R.N. and S.C.M.
Whitland .....	A. R. M. Evans .....	S.R.N., S.C.M. and Tb. Certificate.
Clynderwen .....	S. F. Riley .....	S.R.N. and S.C.M.
Felinfoel .....	A. R. Harries .....	S.R.N. and S.C.M.
Pontyates .....	M. B. Harries .....	S.R.N. and S.C.M.
Dafen .....	E. M. Jones .....	S.R.N., S.C.M. and Tb. Certificate.
Llanybyther .....	D. Jones .....	S.R.N. and S.C.M.
Pencader .....	E. Jenkins .....	S.C.M.
Kidwelly .....	G. M. Thomas .....	S.R.N. and S.C.M.
Pontyberem .....	O. Evans .....	S.R.N. and S.C.M.
Llandebie .....	C. Alewood .....	S.R.N. and S.C.M.
Penygroes .....	M. E. Gravelle .....	S.R.N. and S.C.M.

## CO-ORDINATION.

There is complete co-ordination in the administration of the medical services for the school and the pre-school child. The School Medical Officer is also County Medical Officer of Health, and the Deputy School Medical Officer is also Deputy County Medical Officer of Health. Assistant School Medical Officers also undertake duties in connection with Ante-natal and Infant Welfare Clinics, and the specialist and treatment facilities for the school child are available for the pre-school child. The Health Visitors also act as School Nurses.

## INFECTIOUS DISEASES.

During the year, the following schools were closed by the Education Committee on the advice of the School Medical Officer on account of infectious disease:—

School.	Infectious Disease.	Closure.
Crugybar C.P.	Chicken-pox	13th January to 26th January.
	Chicken-pox and Whooping Cough	27th January to 9th February.
Bethlehem C.P.	Measles	12th May to 23rd May.
Trapp C.P.	Measles	21st July to 25th July.
Abergorlech C.P.	Measles	2nd October to 19th October.
St. Clears V.P.	Measles	9th December to 19th December.

Gwernogle C.P. School was closed by the Local Medical Officer of Health from the 14th October to the 19th October on account of anterior poliomyelitis. This closure was not confirmed by the School Medical Officer as it was not considered necessary or advisable.

There was a serious outbreak of acute poliomyelitis in the County during the latter half of the year, although the County did not suffer as badly as other parts of the Country. Fifty-two cases were confirmed to be suffering from the disease during the year, only seventeen of whom were schoolchildren and fourteen were children under five years of age.

Early in the year, an outbreak of Scarlet Fever occurred among pupils at the Carmarthen Girls' Grammar School; five pupils were admitted to the County Isolation Hospital. A thorough investigation was carried out at the school in conjunction with the staff of the Public Health Laboratory, and nineteen carriers were found among the pupils in attendance. These were excluded from school and referred to their private doctors for treatment. They were not allowed to resume attendance at school until they were

proved to be free from infection. The school was closed for one week while it was given a thorough "spring cleaning" to minimise the spread of infection.

As the Ministry of Education grants to the Education Committee are not now based on average school attendance, the issue of certificates where the attendance fell below 60 per cent. on account of an outbreak of infectious disease, was discontinued.

## MEDICAL INSPECTION AND FINDINGS.

In accordance with the requirements of the Ministry of Education, all Primary, Secondary and Grammar Schools were visited for medical inspection. In addition, 146 Schools were also visited during the year to re-examine children previously referred for treatment or observation. 7,844 children in the routine age groups were examined, and 6,852 special inspections and re-inspections were undertaken.

A statistical summary of the findings of medical inspection will be found in Table II. at the end of this Report. The following are notes on some of the defects found.

**Skin Diseases.**—251 cases were referred for treatment and 25 for observation.

**Eye Defects.**—482 children with defective vision and 75 cases of squint were referred for treatment, while 368 cases and 34 cases were required to be kept under observation for defective vision and squint, respectively.

**Ear Conditions.**—Treatment was advised in 20 cases of defective hearing and 16 cases were referred for observation. For Otitis Media (ear discharge) 37 cases were found to require treatment and 11 cases to be kept under observation. 25 cases of other ear conditions were also referred for treatment and 7 considered to require observation.

**Nose and Throat Conditions.**—1,235 cases of nose and throat defects (which include enlarged tonsils and adenoids, sinusitis, antral conditions, etc.) were found to need treatment, while 1,122 cases were for further observation.

**Speech.**—The number of cases of defective speech found to require treatment was 5; 30 cases were referred for observation.

**Nutrition.**—Of the 7,844 children seen at routine examinations, only 90, or 1.15 per cent. were found with poor nutrition. 1,134 children, or 14.46 per cent. were found to have fair nutrition, while 6,620, or 84.39 per cent. were considered well nourished. These figures are particularly gratifying and shew the value of school milk and meals.

## FOLLOWING-UP.

The School Nurses follow-up to the homes the cases found to be defective at medical inspections, make visits to the homes to obtain consents to treatment, make surprise visits to the Schools for cleanliness surveys, and also visit the homes of cases of uncleanliness, contagious disease, etc.

In addition to the work shown in Table V. at the end of the Report, the Nurses also made 1,908 visits to Schools unaccompanied by Medical Officers, and 19,750 home visits.

## MEDICAL TREATMENT.

Information as to the number of children treated during the year under the Committee's arrangements will be found at the end of the Report.

**Minor Ailments.**—3,190 children received treatment for such ailments as skin disease, minor eye and ear disease, injuries, cuts, etc., at the Minor Ailments Clinics, by medical practitioners, and at the homes under the supervision of the School Nurses. The total attendances at the Minor Ailments Clinics were 9,419, viz., 787 at Ammanford, 3,290 at Carmarthen, and 5,342 at Llanelly.

**Vision.**—Mr. E. K. Roy Thomas held Eye Clinics at Ammanford and Lampeter, and Mr. J. J. Healy at Llanelly and Carmarthen. Glasses were supplied by Opticians under contract with the Education Committee, but some parents made private arrangements for the provision of glasses.

The following summarises the refraction work at the Clinics during the year:—

No. of individual Children examined	... 1096
No. for whom glasses prescribed	... 876
No. for whom glasses were provided under arrangements of Education Committee	813

During 1947, six cases were admitted to the Amman Valley Hospital for operative treatment for squint.

**Ear, Nose and Throat Defects.**—The following is a summary of the defects for which surgical treatment was undertaken during the year under the arrangements of the Education Committee:—

Defect.	Primary School cases.	Secondary School cases.	Total
Tonsils	69	6	75
Adenoids	4	2	6
Tonsils and Adenoids	212	28	240
Polypi	1	3	4
Sinusitis	18	5	23
Deflected Septum	2	4	6
Mastoiditis	1	2	3
Totals	307	50	357



**Plastic Treatment.**—Four cases received plastic treatment by Professor Pomfret Kilner at the Lord Mayor Treloar Hospital, Alton, viz., two for Cleft Palate, one for contracture of the fingers, and one for scar of neck.

**Orthopædic Treatment.**—The Committee's arrangements for orthopædic supervision and after-care continued to work well. The vacant post of Assistant Orthopædic Sister was filled in the early part of the year and it was, therefore, possible to re-open the Llandebie Clinic and to increase the number of sessions held at other Clinics. Additional Clinics were also established at Kidwelly, Pontyates and Whitland. Seventeen Clinics are now functioning in the County.

Mr. A. O. Parker, the Visiting Orthopædic Surgeon, visited the County six times during the year, and examined 236 cases, 22 of whom were advised inpatient treatment.

The Orthopædic arrangements of the Education Committee include provision for the supervision and after-care of cases of other Authorities at a flat rate which for 1947 was 25/- per case per annum.

On the 31st December, 1947, 1,949 cases were being attended to for all Authorities, viz.:—

County Education Committee	...	...	1454
County Maternity and Child Welfare Committee	...	...	387
Carmarthen Borough M. and C.W. Committee	...	...	22
Llanelly Borough M. and C.W. Committee	...	...	54
County Social Welfare Committee	...	...	9
County Public Health Committee	...	...	21
Special	...	...	2

An analysis of these cases according to diagnosis is as follows:—

	County Education Committee.	Other Authorities.	Total.
Paralysis:			
Infantile	14	17	31
Spastic	24	11	35
Obstetrical	2	—	2
Other	—	1	1
Congenital Deformities	170	207	377
Infective Conditions of Bones and Joints	2	5	7
Non-infective Conditions of Bones and Joints:			
Rickets	41	7	48
Other	7	3	10
Static and Postural Defects	1136	234	1370
Traumatic Deformities	24	4	28
Multiple Defects	4	—	4
Miscellaneous	30	6	36
Totals	1454	495	1949

26 cases of the Education Committee were treated by Mr. Parker as inpatients at the Prince of Wales Hospital, Cardiff, and one case at the Robert Jones and Agnes Hunt Hospital, Gobowen. When necessary, arrangements were made for cases (including those for X-ray examination) to attend for special examination by Mr. Parker at the Outpatient Department of the Prince of Wales Hospital, Cardiff.

The attendances at the Clinics in the County showed a marked increase during the year, 15,792 attendances being made as compared with 9,094 for 1946. At the end of the year, the cases were distributed among the Clinics as follows:—

Llanelly ... ..	390	Tumble ... ..	119
Garnant ... ..	65	Llandilo ... ..	58
Pontyberem... ..	85	Carmarthen... ..	266
Llandovery ... ..	101	Burry Port ... ..	140
St. Clears ... ..	141	Pencader ... ..	39
Trimsaran ... ..	60	Brynamman... ..	51
Ammanford... ..	255	Llandebie ... ..	37
Whitland ... ..	43	Pontyates ... ..	39
Kidwelly ... ..	60		

A summary of the work undertaken under the Orthopaedic arrangements during 1947 will be found in the following table:—

	County Education Committee.	Other Authorities.	Total.
Number of Individual children under Scheme on 1st January, 1947 .....	1101	355	1456
Number of new cases during the year .....	560	319	879
Number of cases transferred to .....	174	6	180
Number of individual cases dealt with during the year .....	1835	680	
Number of individual cases dealt with during the year, under the Scheme ..			2335
Number of cases transferred from .....	94	86	180
Number of cases withdrawn from Scheme before the end of year .....	287	99	386
Number of Children under the Scheme on the 31st December .....	1454	495	1949
Total number of attendances made at the Clinics .....	13721	2071	15792
Number of manipulations by Sisters .....	972	1454	2426
Number of plasters applied by Sisters .....	35	96	131
Number of plasters reinforced by Sisters .....	24	32	56
Number of plaster casts taken by Sisters .....			
Number of individual cases received remedial exercises by Sisters .....	1173	15	1188
Number of individual cases massaged by Sisters .....			
Number of home visits by Sisters .....	221	296	517
Number of cases examined by visiting Orthopaedic Surgeon .....	150	86	236
Number of cases recommended in-patient hospital treatment by Surgeon .....	18	4	22

**Tuberculosis.**—Treatment and after-care of these cases is undertaken by the Physicians of the King Edward VII Welsh National Memorial Association, to whom all suspicious cases are referred.

The following is a summary of the children seen by the Tuberculosis Physicians during 1947 (cases referred both by the School Medical Officers and private medical practitioners).

	Dr. J. T. Jones.	Dr. J. Kenyon Davies.	Total.
Total number of children examined during 1947 .....	400	35	435
Number of these children who were—			
(a) Contacts .....	89	3	92
(b) Under School Age .....	87	3	90
Number (of total number) found to be suffering from Tuberculosis in some form .....	28	1	29
Number still under observation .....	24	4	28
Number found with no evidence of active Tuberculosis .....	348	30	378
Details of the children found to be Tuberculous :—			
Pulmonary .....	17		17
Surgical Tuberculosis .....	11	1	12
Analysis of Surgical cases :—			
Spine .....	1		1
Hip .....	3	1	4
Knee .....			
Abdomen .....			
Glands .....	5		5
Shoulder .....			
Other Sites .....	2		2
Treatment :—			
Number treated in Sanatoria .....	1		1
Number treated in Hospital .....	17		17
Number treated in Surgical Hospital .....	9	1	10
Number treated in Open-Air School .....	20		20

Arrangements were made towards the end of the year for the Mass Radiography Unit of the Welsh National Memorial Association to visit the County early in 1948 to undertake the examination of all pupils 14 years of age and over at Secondary and Grammar Schools. These surveys result in the detection of suspicious and early cases of pulmonary tuberculosis, and also of other chest diseases in their early stages.

#### REPORT OF CHIEF DENTAL OFFICER.

During 1947, the dental staff consisted of four whole-time Dental Officers, and one part-time Dental Officer, each of whom was assisted by a Dental Attendant. Treatment is undertaken at

three fixed Clinics (Llanelly, Ammanford and Carmarthen) and at treatment sessions held in Schools. When treatment is carried out at a School, four visits are generally necessary to complete treatment.

The fixed Clinic is undoubtedly the place of choice to carry out dental treatment. More space is available, and there is better light and more substantial and complete equipment. The atmosphere is also more congenial for both patient and dentist; and difficult operations can be handled with a greater degree of confidence. Our fixed Clinics, however, could be improved by the provision of better artificial lighting and some more modern equipment.

Treatment at School often lacks privacy, and there is a general air of excitement which at times is not conducive to the best results. Given a suitable room in a School with some degree of privacy, treatment can be carried out quite satisfactorily and the patient usually returns to the class-room with the minimum loss of time. The child is in familiar surroundings with the Head-teacher or Teacher at hand to give encouragement.

586 treatment sessions were held at the fixed Clinics and 772 sessions at Schools. A summary of the work done is as follows:—

Number of individual children treated	...	7,165
Number of sittings for treatment	...	9,218
Number of teeth extracted	...	7,958
Number of teeth saved by filling	...	4,966
Number of teeth that received minor treatment...		1,999
Number of administrations of a general anæsthetic		1,471

More detailed figures will be found in Table IV of the Statistical Tables.

As has been often stressed in previous reports, the aim of school dentistry is to secure for the child a healthy and efficient mouth. This is done by eliminating sepsis and by means of fillings. The ratio of extractions to fillings is still too high. This is largely due to failure to attend for filling work, and the objection of some parents to the filling of teeth, especially when there is incipient caries which is not visible to them. Most of the filling work is done in permanent teeth, and it is gratifying to see the enthusiasm among some of the older children to possess clean healthy teeth and gums.

The arrangements for dental treatment were extended towards the end of the year by provision for orthodontic treatment which deals with the movement to a correct position of teeth which have erupted in an abnormal position. A normal or near-normal position as possible is obtained, sometimes by judicious extraction of certain teeth to make room for the remainder, and often by mechanical means, i.e., regulation plates. Abnormalities range



from displacement of a single tooth to displacement of teeth involving the whole upper and lower jaws. Orthodontic treatment is essential in these cases not only for the proper functioning of the jaws but also for the improvement of speech and appearance. Normal development, physically and psychologically, is greatly assisted by treatment. Six cases were under treatment at the end of the year. The services of a Consultant Orthodontist are necessary for the work, and the Education Committee have been very fortunate to secure such an eminent consultant as Mr. R. E. Rix, London. His diagnosis and directions for treatment are very complete and clearly indicated.

In conclusion, I have to thank the School Medical Officer, Medical and Dental Staff, Headteachers and Nurses for their valuable co-operation and assistance.

G. UNGOED GRIFFITHS,

Chief Dental Officer.

### **PHYSICAL EDUCATION.**

Physical education, although not part of the School Health Service, should be closely linked with it. The aims and objects of the two services are similar. Physical education should, in particular, play an essential part in the medical arrangements for the orthopaedic treatment of children, but efforts in this direction have so far not been successful.

Mr. I. G. Davies and Miss W. M. Hopkins Jones, the County Organisers of Physical Education, have performed very good work despite many difficulties, and through the courtesy of the Director of Education, the following report has been received from them:—

#### **REPORT OF ORGANISERS OF PHYSICAL EDUCATION.**

Notwithstanding lack of facilities in the County, considerable progress was made in Physical Education during the year. The Education Committee have on all occasions taken every step possible to provide for the schools and the welfare of the children. We have to thank Mr. H. Wyn Jones, Director of Education, for the lead he has always given and for the great interest he has shown in all aspects of the work.

#### **Primary Schools.**

In order to develop comprehensive schemes of training, it is necessary to provide adequate supplies of apparatus and suitable playground surface. The Committee have recently been liberal in their grants towards procuring apparatus, and during the next three years it is hoped to provide a good supply of essential equipment to all schools. While many schools have adequate playground space with a suitable tarpaved surface, there are too many

with hardly any space at all. Teachers are thus badly handicapped in their teaching, and as a result the children suffer immeasurable harm. Where there are suitable facilities and good teaching, marked progress may be seen both in development, posture, and lightness of movement. Very few Primary Schools have halls or indoor space for physical training and, therefore, during the rainy weather much valuable time is lost. Little can be done to obviate this difficulty in overcrowded and dusty classrooms.

During the year, new methods of teaching were introduced into the schools in the Ammanford and Llandilo areas. The new work is less formal, provides for more activity, and induces more effort on the part of the child. Already there are marked signs of improvement in response and movement. It is too early yet to remark on posture, but we feel confident that there will be the resultant beneficial effects. This modern work is really an organised form of play, i.e., what the ordinary child would do during its play periods. More emphasis, however, is laid on hanging, climbing and relaxation, and opportunity is given for individual practice of exercises and activities. Children show far more interest and enthusiasm for this work and are beginning to understand what is meant by movement.

At the moment, we are introducing new apparatus in Ammanford Infants' and Ammanford County Primary Schools. When the children have become accustomed to the apparatus we should be very pleased to invite the School Medical Officer and his staff to see the Physical Education in the schools, and to discuss the type of work which has been introduced.

During the Summer of 1947, two new Primary School Sports Associations were formed. Altogether there are now five Associations functioning, and they all hold annual sports meetings. During the Summer of 1948, it is hoped to organise at least three new Associations.

Schools in the Amman Valley and Llanelly areas have facilities for swimming, and, during the summer, use was made of the Hendy Swimming Pool. Swimming is an important aspect of Physical Education, but until such time as swimming pools are provided very little can be accomplished.

Few Primary Schools have playing fields, and those that have, cannot adequately maintain them.

## **Secondary Schools.**

Nearly all Secondary Schools now have fully qualified specialist or semi-specialist teachers of physical education. The provision for the coaching of minor and major games and athletics, however, leaves much to be desired. This is not the fault of the teachers, nor is it lack of enthusiasm. In fact, it is surprising what excellent results have been achieved under most trying con-

ditions. The schools' playing fields are totally inadequate and poorly maintained. There are five Secondary Schools in the County that have no Playing Field and have to use Public Parks. In the interests of the children, it is extremely urgent that this should be remedied.

During the year, the Carmarthenshire Secondary Schools Athletic Association, consisting of a small band of enthusiastic teachers, functioned most successfully. The Association held its Annual Athletics Championship Meeting at Carmarthen in May. Over four hundred Secondary Schools' Athletes participated. We should like to thank the School Medical Officer for placing the services of one of his staff at the disposal of the Association on Sports Day. The standard of achievement in Athletics is steadily improving, and in the Welsh Secondary Schools Championships at Pontypridd, Carmarthenshire was placed second. We should like to thank Mr. Wyn Jones and the Education Committee for the interest they have taken in the work of the Association and for their kind support.

Good work is being done by teachers in developing carefully planned schemes of training for boys of different age ranges with beneficial results. There is no sight more pleasing than that of sturdy, healthy, well trained young athletes enthusiastically fighting for premier honours on the field of sport.

### **Orthopædic Work.**

In March, at the request of the School Medical Officer, we met the Senior Orthopædic Sister to discuss orthopædic work in schools. It was decided to select six Secondary Schools and to experiment in those schools provided the Headmasters were prepared to co-operate. Mr. H. Wyn Jones communicated with the Headmasters concerned, and all six intimated their willingness to co-operate. The teachers in the schools concerned subsequently met the Orthopædic Sister and ourselves, and approved set tables of exercises were distributed. However, the scheme was doomed to failure, for in nearly all instances, Headmasters refused to modify their time tables in order to provide for orthopædic classes. Two or three teachers, however, volunteered to take classes during the lunch hour and immediately following afternoon school. In one Secondary School, the scheme fell through owing to lack of accommodation. The need for such classes is urgent, but until Headmasters can find time in their time table for a daily period it cannot succeed.

### **Camping.**

The Pendine School Camp being occupied by the Military Authorities was not available for school camps. As a result, no Primary School children were sent to camp. A few secondary



school pupils along with members of Youth Clubs attended the camp organised by the Authority at Ferryside. This aspect of Physical Education has been neglected in the County in recent years, and should receive the Authority's immediate attention. In our report for the quarter ended December, 1947, we pointed out the need for teaching boys and girls the rudiments of camping. This can only be done if the Education Committee is prepared to procure canvas tents for the use of schools. Camping fosters a love for outdoor life, vigorous and healthy living, and should form part of a well balanced scheme in Physical Education.

I. G. DAVIES.

W. M. HOPKINS JONES.

Organisers of Physical Education.

### SCHOOL MILK AND MEALS.

At the end of the year, of the school population of 23,377, milk and meals were provided for the following number of pupils:—

Milk ...	...	16,804 (71.88 per cent.).	.
Meals ...	...	16,079 (68.78 per cent.).	

Every effort is made to ensure the satisfactory standard of the milk supplied to schools. Pasteurised or Tuberculin Tested milk is supplied when available, and satisfactory samples of other milk are obtained before being authorised for schools. Regular samples are taken of all school milk by the staff of the Chief Inspector of Weights and Measures. The following gives the number of Departments receiving different grades of milk:—

Pasteurised Milk ...	...	...	134
Tuberculin Tested Milk	...	...	32
Accredited Milk ...	...	...	12
Non-Designated Milk	...	...	25
National Dried Milk	...	...	17

It is a sad reflection that in a large milk-producing County like Carmarthenshire, arrangements for liquid milk could not be made at seventeen Departments, which were supplied with dried milk. Eleven Departments had no arrangements for the provision of milk.

During the year, arrangements were made for the excreta of all school kitchen and canteen staffs to be investigated bacteriologically to ensure that they were not carriers of food borne infections. The results were satisfactory in the great majority of cases. Where infection was indicated, it was only of a mild character and quickly responded to treatment.

## CO-OPERATION OF PARENTS, TEACHERS AND VOLUNTARY ORGANISATIONS.

Generally, parents display an active interest in the medical inspection and treatment of their children, and are eager to follow the advice given by Medical Officers.

Appreciation of the keen interest and active co-operation of Headteachers and their staffs must again be recorded. The importance of their influence in matters relating to the children and also to the parent cannot be over estimated, and the activities of the School Health Service would be seriously handicapped without that help and co-operation.

The only voluntary body in the area with which active co operation is maintained is the N.S.P.C.C. Thanks are due to the Local Inspectors for their valued co-operation and tact in dealing with difficult cases.

### TABLE I.

#### MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

##### A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups:—

Entrants	...	...	...	3356
Second Age Group	...	...	...	1315
Third Age Group	...	...	...	986

Total	...	...	...	5657
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Number of other Periodic Inspections	...	...	...	2187
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Grand Total	...	...	...	7844
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##### B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	1772
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Number of Re-Inspections	...	...	...	5080
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Total	...	...	...	6852
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##### C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to require Treatment (excluding Dental Disease and Infestation with Vermin).

Group. (1)	For defective vision (exclud- ing squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils. (4)
Entrants	80	1162	1234
Second Age Group	91	300	374
Third Age Group	64	184	242
Total (prescribed groups)	235	1646	1850
Other Periodic Inspections	145	609	716
Grand Total	380	2255	2566

(A). RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st  
DECEMBER, 1947.

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Defect or Disease.	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	No. of defects.		No. of defects.	
	Requiring treatment. (2)	Requiring to be kept under observation, but not requiring treatment. (3)	Requiring treatment. (4)	Requiring to be kept under observation, but not requiring treatment. (5)
(1)				
Skin	214	19	37	6
Eyes—	380	290	102	78
(a) Vision	55	23	20	11
(b) Squint	167	30	28	6
(c) Other	12	11	8	5
Ears—	27	9	10	2
(a) Hearing	20	6	5	1
(b) Otitis Media	945	996	290	126
(c) Other	4	24	1	6
Nose or Throat	57	364	1	55
Speech	18	222	9	29
Cervical Glands	193	154	48	50
Heart and Circulation	15	15	4	3
Lungs	.....	12	3	7
Developmental—	46	80	8	8
(a) Hernia	279	84	60	14
(b) Other	366	144	104	26
Orthopaedic—	2	10	.....	3
(a) Posture	5	6	3	10
(b) Flat foot	.....	61	1	41
(c) Other	.....	.....	.....	.....
Nervous system—	232	147	56	78
(a) Epilepsy	.....	.....	.....	.....
(b) Other	.....	.....	.....	.....
Psychological—	.....	.....	.....	.....
(a) Development	.....	.....	.....	.....
(b) Stability	.....	.....	.....	.....
Other	.....	.....	.....	.....

(B.) CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR  
IN THE AGE GROUPS.

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	3356	2755	82.09	562	16.75	39	1.16
Second Age Group	1315	1110	84.41	182	13.84	23	1.75
Third Age Group	986	917	93.00	64	6.49	5	.51
Other Periodic Inspections	2187	1838	84.04	326	14.91	23	1.05
Total	7844	6620	84.39	1134	14.46	90	1.15



## TABLE III.

## TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Table V).

(a)	Number of defects treated, or under treatment during the year.
Skin—	
Ringworm—Scalp—	
(i) X-Ray treatment	.....
(ii) Other treatment	..... 32
Ringworm—Body	..... 27
Scabies	..... 110
Impetigo	..... 263
Other skin diseases	..... 262
Eye Disease	..... 262
(External and other, but excluding errors of refraction, squint and cases admitted to hospital).	
Ear Defects	..... 79
Miscellaneous	..... 2155
(e.g. minor injuries, bruises, sores, chilblains, etc.)	
Total	..... 3190

(b) Total number of attendances at Authority's minor ailments clinics .... 9419

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Eye Disease treated as Minor Ailments—Group I).

	No. of defects dealt with.
Errors of Refraction (including squint) ...	936
Other defect or disease of the eyes (excluding those in Group I) ...	160
Total ...	1096
No. of Pupils for whom spectacles were	
(a) Prescribed	876
(b) Obtained.	813



(7) Extractions: Permanent Teeth	...	...	1124
Temporary Teeth	...	...	6834
Total	...	...	<hr/> 7958 <hr/>
(8) Administration of general anæsthetics for extraction			1471
(9) Other Operations: (a) Permanent Teeth	...	...	1610
(b) Temporary Teeth	...	...	389
Total (a) and (b)	...	...	<hr/> 1999 <hr/>

**TABLE V.—INFESTATION WITH VERMIN.**

(i) Total number of examinations in the schools by the school nurses or other authorized persons	...	108320
(ii) Total number of individual pupils found to be infested	... ..	1548
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	... ..	8
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	... ..	—

